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## UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA

### CHAPTER 13 PLAN AND RELATED MOTIONS

Name of Debtor(s): Antoinette M. Freeman	Case No: 14-31765-KRH
This plan, dated April 9, 2014, is:	
the <i>first</i> Chapter 13 plan filed in a modified Plan, which replace □confirmed or □unconfirmed	es the
Date and Time of Modified Pla	an Confirming Hearing:
Place of Modified Plan Confirm	nation Hearing:
The Plan provisions modified by this	filing are:

NOTICE: YOUR RIGHTS WILL BE AFFECTED. You should read these papers carefully. If you oppose any provision of this Plan, or if you oppose any included motions to (i) value collateral, (ii) avoid liens, or (iii) assume or reject unexpired leases or executory contracts, you MUST file a timely written objection.

This Plan may be confirmed and become binding, and the included motions in paragraphs 3, 6, and 7 to value collateral, avoid liens, and assume or reject unexpired leases or executory contracts may be granted, without further notice or hearing unless a written objection is filed not later than seven (7) days prior to the date set for the confirmation hearing and the objecting party appears at the confirmation hearing.

The debtor(s)' schedules list assets and liabilities as follows:

Total Assets: \$276,906.00

Total Non-Priority Unsecured Debt: \$52,927.00

Creditors affected by this modification are:

Total Priority Debt: **\$0.00**Total Secured Debt: **\$265,151.00** 

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1.	Funding of Plan. The deb	tor(s) propo	ose to pay the trustee the sum of \$955.00 Me	onthly for 60 months.	Other payments to
	the Trustee are as follows:	NONE	. The total amount to be paid into the plan	s \$ <b>57,300.00</b> .	

- 2. **Priority Creditors.** The Trustee shall pay allowed priority claims in full unless the creditor agrees otherwise.
  - A. Administrative Claims under 11 U.S.C. § 1326.
    - 1. The Trustee will be paid the percentage fee fixed under 28 U.S.C. § 586(e), not to exceed 10%, of all sums disbursed except for funds returned to the debtor(s).
    - 2. Debtor(s)' attorney will be paid \$\_2,781.00 balance due of the total fee of \$\_3,000.00 concurrently with or prior to the payments to remaining creditors.
  - B. Claims under 11 U.S.C. §507.

The following priority creditors will be paid by deferred cash payments pro rata with other priority creditors or in monthly installments as below, except that allowed claims pursuant to 11 U.S.C. § 507(a)(1) will be paid prior to other priority creditors but concurrently with administrative claims above:

Creditor Type of Priority Estimated Claim Payment and Term -NONE-

- 3. Secured Creditors: Motions to Value Collateral ("Cramdown"), Collateral being Surrendered, Adequate Protection Payments, and Payment of certain Secured Claims.
  - A. Motions to Value Collateral (other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) or by the final paragraph of 11 U.S.C. § 1325(a)). Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion to value collateral as set forth herein.

This section deals with valuation of certain claims secured by real and/or personal property, other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) [real estate which is debtor(s)' principal residence] or by the final paragraph of 11 U.S.C. § 1325(a) [motor vehicles purchased within 910 days or any other thing of value purchased within 1 year before filing bankruptcy], in which the replacement value is asserted to be less than the amount owing on the debt. Such debts will be treated as secured claims only to the extent of the replacement value of the collateral. That value will be paid with interest as provided in sub-section D of this section. You must refer to section 3(D) below to determine the interest rate, monthly payment and estimated term of repayment of any "crammed down" loan. The deficiency balance owed on such a loan will be treated as an unsecured claim to be paid only to the extent provided in section 4 of the Plan. The following secured claims are to be "crammed down" to the following values:

<u>Creditor</u> <u>Collateral</u> <u>Purchase Date</u> <u>Est Debt Bal.</u> <u>Replacement Value</u> -NONE-

B. Real or Personal Property to be Surrendered.

Upon confirmation of the Plan, or before, the debtor(s) will surrender his/her/their interest in the collateral securing the claims of the following creditors in satisfaction of the secured portion of such creditors' allowed claims. To the extent that the collateral does not satisfy the claim, any timely filed deficiency claim to which the creditor is entitled may be paid as a non-priority unsecured claim. Confirmation of the Plan shall terminate the automatic stay as to the interest of the debtor(s) and the estate in the collateral.

<u>Creditor</u> <u>Collateral Description</u> <u>Estimated Value</u> <u>Estimated Total Claim</u>

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#### C. Adequate Protection Payments.

The debtor(s) propose to make adequate protection payments required by 11 U.S.C. § 1326(a) or otherwise upon claims secured by personal property, until the commencement of payments provided for in sections 3(D) and/or 6(B) of the Plan, as follows:

<u>Creditor</u> <u>Collateral Description</u> <u>Adeq. Protection</u> <u>Monthly Payment</u> <u>To Be Paid By</u>

-NONE-

Any adequate protection payment upon an unexpired lease of personal property assumed by the debtor(s) pursuant to section 6(B) of the Plan shall be made by the debtor(s) as required by 11 U.S.C. § 1326(a)(1)(B) (payments coming due after the order for relief).

D. Payment of Secured Claims on Property Being Retained (except only those loans provided for in section 5 of the Plan):

This section deals with payment of debts secured by real and/or personal property [including short term obligations, judgments, tax liens and other secured debts]. After confirmation of the Plan, the Trustee will pay to the holder of each allowed secured claim, which will be either the balance owed on the indebtedness or, where applicable, the collateral's replacement value as specified in sub-section A of this section, whichever is less, with interest at the rate provided below, the monthly payment specified below until the amount of the secured claim has been paid in full. Upon confirmation of the Plan, the valuation and interest rate shown below will be binding unless a timely written objection to confirmation is filed with and sustained by the Court.

Approx. Bal. of Debt or Creditor Collateral Collateral Pown" Value None
Approx. Bal. of Debt or Creditor None
"Crammed Down" Value Rate Monthly Paymt & Est. Term\*\*

#### E. Other Debts.

Debts which are (i) mortgage loans secured by real estate which is the debtor(s)' primary residence, or (ii) other long term obligations, whether secured or unsecured, to be continued upon the existing contract terms with any existing default in payments to be cured pursuant to 11 U.S.C. § 1322(b)(5), are provided for in section 5 of the Plan.

#### 4. Unsecured Claims.

- A. Not separately classified. Allowed non-priority unsecured claims shall be paid pro rata from any distribution remaining after disbursement to allowed secured and priority claims. Estimated distribution is approximately 2
   %. The dividend percentage may vary depending on actual claims filed. If this case were liquidated under Chapter 7, the debtor(s) estimate that unsecured creditors would receive a dividend of approximately 0 %.
- B. Separately classified unsecured claims.

<u>Creditor</u> <u>Basis for Classification</u> <u>Treatment</u>

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- 5. Mortgage Loans Secured by Real Property Constituting the Debtor(s)' Primary Residence; Other Long Term Payment Obligations, whether secured or unsecured, to be continued upon existing contract terms; Curing of any existing default under 11 U.S.C. § 1322(b)(5).
  - A. Debtor(s) to make regular contract payments; arrears, if any, to be paid by Trustee. The creditors listed below will be paid by the debtor(s) pursuant to the contract without modification, except that arrearages, if any, will be paid by the Trustee either pro rata with other secured claims or on a fixed monthly basis as indicated below, without interest unless an interest rate is designated below for interest to be paid on the arrearage claim and such interest is provided for in the loan agreement.

Creditor	Collateral	Regular Contract Payment	Estimated Arrearage	Arrearage Interest Rate	Estimated Cure Period	Monthly Arrearage Payment
Ocwen Loan Servicing LLC	Primary Residence located at 4206 Seminary Avenue,	1,459.61	20,000.00	0%	60 months	333.33
Virginia Community Capital	Richmond, VA 23227 Primary Residence located at 4206 Seminary Avenue, Richmond, VA 23227	1,500.00	27,150.35	0%	60 months	452.51

**B.** Trustee to make contract payments and cure arrears, if any. The Trustee shall pay the creditors listed below the regular contract monthly payments that come due during the period of this Plan, and pre-petition arrearages on such debts shall be cured by the Trustee either pro rata with other secured claims or with monthly payments as set forth below.

		Regular Contract Estimated	Interest	Term for	Monthly Arrearage
Creditor -NONE-	Collateral	<u>Payment</u> <u>Arrearage</u>	Rate	Arrearage	Payment

**C. Restructured Mortgage Loans to be paid fully during term of Plan.** Any mortgage loan against real estate constituting the debtor(s)' principal residence upon which the last scheduled contract payment is due before the final payment under the Plan is due shall be paid by the Trustee during the term of the Plan as permitted by 11 U.S.C. § 1322(c)(2) with interest at the rate specified below as follows:

~	~	Interest	Estimated	
<u>Creditor</u>	<u>Collateral</u>	Rate	Claim	Monthly Paymt& Est. Term**
-NONE-		<del></del>		

- **6. Unexpired Leases and Executory Contracts.** The debtor(s) move for assumption or rejection of the executory contracts and leases listed below.
  - **A. Executory contracts and unexpired leases to be rejected.** The debtor(s) reject the following executory contracts.

Creditor	Type of Contract
-NONE-	

**B.** Executory contracts and unexpired leases to be assumed. The debtor(s) assume the following executory contracts. The debtor agrees to abide by all terms of the agreement. The Trustee will pay the pre-petition arrearages, if any, through payments made pro rata with other priority claims or on a fixed monthly basis as indicated below.

			Monthly	
			Payment	Estimated
Creditor	Type of Contract	Arrearage	for Arrears	Cure Period
-NONE-				

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- 7. Liens Which Debtor(s) Seek to Avoid.
  - A. The debtor(s) move to avoid liens pursuant to 11 U.S.C. § 522(f). The debtor(s) move to avoid the following judicial liens and non-possessory, non-purchase money liens that impair the debtor(s)' exemptions. Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion and cancel the creditor's lien. If an objection is filed, the Court will hear evidence and rule on the motion at the confirmation hearing.

<u>Creditor</u> <u>Collateral</u> <u>Exemption Amount</u> <u>Value of Collateral</u>

**B.** Avoidance of security interests or liens on grounds other than 11 U.S.C. § 522(f). The debtor(s) have filed or will file and serve separate pleadings to avoid the following liens or security interests. The creditor should review the notice or summons accompanying such pleadings as to the requirements for opposing such relief. The listing here is for information purposes only.

<u>Creditor</u> <u>Type of Lien</u> <u>Description of Collateral</u> <u>Basis for Avoidance</u>

- 8. Treatment and Payment of Claims.
  - All creditors must timely file a proof of claim to receive payment from the Trustee.
  - If a claim is scheduled as unsecured and the creditor files a claim alleging the claim is secured but does not timely object to confirmation of the Plan, the creditor may be treated as unsecured for purposes of distribution under the Plan. This paragraph does not limit the right of the creditor to enforce its lien, to the extent not avoided or provided for in this case, after the debtor(s) receive a discharge.
  - If a claim is listed in the plan as secured and the creditor files a proof of claim alleging the claim is unsecured, the creditor will be treated as unsecured for purposes of distribution under the Plan.
  - The Trustee may adjust the monthly disbursement amount as needed to pay an allowed secured claim in full.
- 9. Vesting of Property of the Estate. Property of the estate shall revest in the debtor(s) upon confirmation of the Plan. Notwithstanding such vesting, the debtor(s) may not sell, refinance, encumber real property or enter into a mortgage loan modification without approval of the Court after notice to the Trustee, any creditor who has filed a request for notice and other creditors to the extent required by the Local Rules of this Court.
- **10. Incurrence of indebtedness.** The debtor(s) shall not voluntarily incur additional indebtedness exceeding the cumulative total of \$5,000 principal amount during the term of this Plan, either unsecured or secured against personal property, except upon approval of the Court after notice to the Trustee, any creditor who has filed a request for notice, and other creditors to the extent required by the Local Rules of this Court.
- 11. Other provisions of this plan:
  - I. Payment of Adequate Protection
  - All adequate protection payments set forth in Section 3.C are to be paid through the Trustee.
  - The Debtor(s) shall pay regular post-petition contract payments to the creditors listed in Section 5.A., and such payments shall also constitute adequate protection payments to such creditors. Accordingly, the Trustee shall not pay adequate protection payments to creditors listed in Section 5.A.
  - No adequate protection payments are to be paid to any creditors unless the Plan provides for the payment of adequate protection of such claim(s) through the Trustee in Section 3.C. or directly by the Debtor(s) in Section 5.A., or unless the Court orders otherwise.

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Signatures:		
Dated: Apr	ril 9, 2014	
/s/ Antoinette		/s/ Julia B. Adair VSB
Antoinette M. Debtor	Freeman	Julia B. Adair VSB #45130 Debtor's Attorney
Exhibits:	Copy of Debtor(s)' Budget (s Matrix of Parties Served with	
I certify that on		Certificate of Service py of the foregoing to the creditors and parties in interest on the attached Service List
		Julia B. Adair VSB
		ia B. Adair VSB #45130 nature
	34 <u>Ri</u>	2 Cutshaw Avenue hmond, VA 23230-0872 dress
		1-257-9944
	Te	ephone No.

Ver. 09/17/09 [effective 12/01/09]

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Fill	in this information to identify	your case:						
Deb	otor 1 Antoin	ette M. Freeman			_			
	otor 2				_			
Uni	ted States Bankruptcy Court	for the: EASTERN DISTRICT	OF VIRGINIA		_			
	se number 14-31765-K	(RH	-			heck if this is: An amende A suppleme		etition chapter
$\bigcirc$	fficial Form B 6I					13 income a	as of the following	date:
	chedule I: Your					MM / DD/ Y	YYY	12/13
sup <sub> </sub>	plying correct information. use. If you are separated a	as possible. If two married per If you are married and not fili nd your spouse is not filing w form. On the top of any addit	ing jointly, and your rith you, do not inclu	spouse	is living v mation al	with you, incl bout your spo	ude information a ouse. If more space	about your ce is needed,
Par	t 1: Describe Employ	ment						
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing spo	use
	If you have more than one attach a separate page with information about additional	h Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>			■ Emplo	•	
	employers.	Occupation	Self Employed			Custom	er Service	
	Include part-time, seasonal self-employed work.	l, or Employer's name				Bank of	America	
	Occupation may include story or homemaker, if it applies.							
		How long employed t	there? 2005			2	005	
Par	t 2: Give Details Abo	ut Monthly Income						
spou	use unless you are separated		, ,	•	, ,			S
	u or your non-filing spouse n e space, attach a separate sl	nave more than one employer, cheet to this form.	ombine the information	on for all 6	employers	s for that perso	on on the lines beig	w. If you need
					For	Debtor 1	For Debtor 2 or non-filing spou	
2.		s, salary, and commissions (boothly, calculate what the month		2.	\$	0.00	\$3,872	72
3.	Estimate and list monthly	y overtime pay.		3.	+\$	0.00	+\$205	.83
4.	Calculate gross Income.	Add line 2 + line 3.		4.	\$	0.00	\$ 4,078.5	<u>5</u>

Official Form B 6I Schedule I: Your Income page 1

Debt	or 1	Antoinette M. Freeman		Ca	se number (if known)	14-31765-K	(RH	
				F	or Debtor 1	For Debtor	2 or	
				•	or Debtor 1	non-filing		
	Cop	by line 4 here	4.	\$	0.00	\$ 4	,078.55	5
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	538.42	<u> </u>
	5b.	Mandatory contributions for retirement plans	5b.	\$		\$	0.00	<del>-</del>
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	<del></del>
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	)
	5e.	Insurance	5e.	\$		\$	343.05	<u>5</u>
	5f.	Domestic support obligations	5f.	\$		\$	0.00	_
	5g.	Union dues	5g.	\$		\$	0.00	
	5h.	Other deductions. Specify: PTO	_ 5h.+			+ \$	66.11	_
		Accidental death	_	\$		\$	5.31	_
		Life LTD	_	\$ \$		\$ \$	153.77	
			-			· <del></del>	12.85	_
6. -		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. -	\$	0.00		,119.51	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$2	,959.04	<u> </u>
8.	8a.	all other income regularly received:  Net income from rental property and from operating a business,						
	ou.	profession, or farm						
		Attach a statement for each property and business showing gross						
		receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	ď	2 222 00	<b>c</b>	0.00	
	8b.	Interest and dividends	8b.	\$ \$		\$ \$	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent	OD.	Ψ	0.00	Ψ	0.00	<u>'</u> _
	00.	regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce	_	_		_		
	0.1	settlement, and property settlement.	8c.	\$		\$	0.00	
	8d.	Unemployment compensation	8d.	\$		\$	0.00	
	8e. 8f.	Social Security Other government assistance that you regularly receive	8e.	\$	0.00	Ф	0.00	<u>)</u>
	OI.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance						
		that you receive, such as food stamps (benefits under the Supplemental						
		Nutrition Assistance Program) or housing subsidies.				_		
	0	Specify:	- 8f.	\$		\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	<u>)                                    </u>
	8h.	Amortized State and Federal Tax Other monthly income. Specify: Refunds	8h.+	- \$	300.00	+ \$	0.00	)
	OII.	Anticipated increase in income	_ 0111	\$		\$	0.00	_
		Anticipated increase in moone	_	_	300.00		0.00	<u>′</u> _
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	4,133.00	\$	0.0	00
			_					
10.	Cald	culate monthly income. Add line 7 + line 9.	10. \$		4,133.00 + \$	2,959.04	= \$	7,092.04
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					* -	1,002.01
11	Stat	te all other regular contributions to the expenses that you list in Schedule						
• • • •		ude contributions from an unmarried partner, members of your household, your		nde	nts, your roommate	s, and		
		er friends or relatives.						
	Do r Spe	not include any amounts already included in lines 2-10 or amounts that are not a	availal	ble	to pay expenses lis			0.00
	Spe	Clly.					<u>+\$</u> _	0.00
12.	Add	I the amount in the last column of line 10 to the amount in line 11. The res	ult is t	the	combined monthly	income.		
		te that amount on the Summary of Schedules and Statistical Summary of Certain	in Lial	oiliti	es and Related <i>Dat</i>	a, if it	er.	7,092.04
	appl	lies				12.	Φ	1,032.04
							Combi	
12	Do.	you expect an increase or decrease within the year after you file this form?	2				month	ly income
13.	<b>₽</b> 0 }	No.	•					
	=	Ver Fordelin						

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Hilli	in this info	rmation to identify	your case:					
Deb	tor 1	Antoinette	M. Free	eman		Check	if this is:	
						☐ An	amended filing	
	tor 2	>						g post-petition chapter 13
(Spc	ouse, if filin	1g)				ex	penses as of the follo	owing date:
Unit	ed States B	Bankruptcy Court for	or the: E	ASTERN DISTRICT OF VIRG	INIA	N	MM / DD / YYYY	
Case	number	14-31765-KR	Н			Па	senarate filing for D	ebtor 2 because Debtor 2
(If k	nown)						aintains a separate h	
		Form B 6J	=					
		e J: Your 🛚						12/13
				f two married people are filing th another sheet to this form.				
		i more space is ne iswer every questi		in another sheet to this form.	On the top of any addition	mai pages,	write your name a	nu case number
D (	1 D		. 1 . 1 1					
Part 1.		escribe Your Hous joint case?	sehold					
	-	o to line 2.						
		O to fine 2.  Does Debtor 2 live	in a conar	ata hausahald?				
	_	No	та зерат	ate nousenoid.				
		<ul><li>No</li><li>Yes. Debtor 2 m</li></ul>	ust file a se	narate Schedule I				
			ust The a se	parate benedure 3.				
2.	Do you h	ave dependents?	□ No					
	Do not lis Debtor 2.	st Debtor 1 and		Fill out this information for endent	Dependent's relation Debtor 1 or Debtor	•	Dependent's age	Does dependent live with you?
	Do not sta	ate the dependents'						□ No
	names.				Daughter		12	Yes
					B		40	□ No
					Daughter		12	Yes
					Doughtor		4.4	□ No
					Daughter		14	■ Yes
								□ No □ Yes
3.	Do your	expenses include		No				Li Tes
		of people other th	<sup>ian</sup> r	Yes				
	yourself a	and your depende	ents?	100				
Part		timate Your Ongo						
				ptcy filing date unless you are is filed. If this is a supplemen				
	licable dat		анкі прісу	is med. If this is a supplemen	nai Schedule J, Check the	DOX at the	top of the form and	i iii iii tile
T . 1								
				overnment assistance if you k hedule I: Your Income (Officia			Your exp	enses
4.	The ments	al or home owner	shin ovnon	ses for your residence. Include	e first martagae novements			
4.		ent for the ground		ses for your residence. Include	e mst mortgage payments	4. \$		1,459.61
	If not inc	cluded in line 4:						
	4a. Re	al estate taxes				4a. \$		0.00
		operty, homeowner	's, or rente	r's insurance		4b. \$		0.00
	4c. Ho	ome maintenance, r	epair, and	upkeep expenses		4c. \$		0.00
		omeowner's associa				4d. \$		0.00
5	Addition	al mantagas rarm	onto for	nun nocidonas, quab as homo as	wity loons	= c		0.00

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Debtor 1	Antoinette M. Freeman	Case number (if	known) 14-31765-KRH
c 1141	lities:		
6. <b>Uti</b> l 6a.	Electricity, heat, natural gas	6a. \$	251.00
6b.	Water, sewer, garbage collection	6b. \$	60.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	70.00
6d.	Other. Specify:	6d. \$	0.00
	d and housekeeping supplies	7. \$	746.00
	ldcare and children's education costs	8. \$	290.00
	thing, laundry, and dry cleaning	9. \$	85.00
	sonal care products and services	10. \$	
	dical and dental expenses		75.00
	•	11. \$	100.00
	unsportation. Include gas, maintenance, bus or train fare.  not include car payments.	12. \$	300.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
	aritable contributions and religious donations	14. \$	0.00
	urance.	_	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.		
15a	. Life insurance	15a. \$	220.00
15b	. Health insurance	15b. \$	0.00
15c	. Vehicle insurance	15c. \$	270.00
15d	. Other insurance. Specify:	15d. \$	0.00
6. <b>Tax</b>	xes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Spe	cify: Personal Property Taxes	16. \$	50.00
	tallment or lease payments:		
17a	. Car payments for Vehicle 1	17a. \$	0.00
17b	. Car payments for Vehicle 2	17b. \$	0.00
17c	. Other. Specify: <b>VCC</b>	17c. \$	1,500.00
17d	. Other. Specify:	17d. \$	0.00
8. <b>Yo</b> u	ir payments of alimony, maintenance, and support that you did not report as	deducted	
	m your pay on line 5, Schedule I, Your Income (Official Form 6I).	18. \$	0.00
	er payments you make to support others who do not live with you.	\$	0.00
	cify:	19.	
	ner real property expenses not included in lines 4 or 5 of this form or on Sche		
20a		20a. \$	0.00
20b		20b. \$	0.00
20c	• •	20c. \$	0.00
20d	7 1 7 1 1	20d. \$	0.00
	. Homeowner's association or condominium dues	20e. \$	0.00
1. <b>Oth</b>	ner: Specify: Miscellaneous	21. +\$	150.00
Hu	sband's credit card payments	+\$	510.00
2 <b>V</b> oi	ir monthly expenses. Add lines 4 through 21.	22. \$	6,136.61
	result is your monthly expenses.	ΔΔ.	0,130.01
	culate your monthly net income.		
	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	7,092.04
	Copy your monthly expenses from line 22 above.	23b\$	6,136.61
230	. Copy your monthly expenses from the 22 above.	<i>250.</i> Ψ	0,130.01
23c	. Subtract your monthly expenses from your monthly income.		
230	The result is your <i>monthly net income</i> .	23c. \$	955.43
For your			or decrease because of a modification to the te
	Yes. Explain:		

Anastasia Moore P.O. Box 15781 Richmond, VA 23227

Andre Freeman 4206 Semnary Avenue Richmond, VA 23227

BB&T P. O. Box 1847 Wilson, NC 27894

BCC Financial Management Sve 3230 W. Commercial Blvd, #200 Re: St Mary's Hospital Fort Lauderdale, FL 33309

Bon Secours St. Mary's Hosp. Attn: Bankruptcy Department PO Box 28538 Richmond, VA 23228-8538

Comenity Bank/LNBRYANT Bankruptcy Dept P.O. Box 182125 Columbus, OH 43218-2125

Creative Treatments P.O. Box 106 Worton, MD 21678

Credit Adjustment Board 306 E. Grace Street Re: Richmond Ambulance Richmond, VA 23219

Credit Adjustment Board 306 E. Grace Street Re: Richmond Emergency Phys Richmond, VA 23219

CSCL Dispute Team
MAC N8235-04M
P.O. Box 14517
Des Moines, IA 50306

Department of the Treasury Financial Management Service P.O. Box 830794 Birmingham, AL 35283-0794

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GE Capital Retail Bank Portfolio Recovery Associates P. O. Box 12914 Norfolk, VA 23541

GECRB/Care Credit P. O. Box 965036 Orlando, FL 32896

GECRB/PayPal P. O. Box 965036 Orlando, FL 32896

Glasser & Glasser, P.L.C. Crown Center, Suite 600 580 East Main Street Norfolk, VA 23510

Henrico Doctor's Hospital Attn: Legal Dept. P.O. Box 13620 Richmond, VA 23225

Kohl's/Capital One P. O. Box 3115 Milwaukee, WI 53201

Kravet Inc. 225 Central Avenue South Bethpage, NY 11714

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MCV Hospitals P.O. Box 980462 Re: Bankruptcy Richmond, VA 23298-0462

Midland Credit Management 8875 Aero Drive Ste 200 San Diego, CA 92123

Ocwen Loan Servicing LLC Deutsche Bank Nat'l Trust Co. 1100 Virginia Dr. Ste 175 Fort Washington, PA 19034

Office of the US Trustee 701 E. Broad Street Room 4304 Richmond, VA 23219

Paul S. Bliley, Jr., Esquire P.O. Box 1320 RE: Community Capital Bank Richmond, VA 23218-1320

Richmond Abulance Autority 2400 Hermitage Road Richmond, VA 23220

Richmond Emergency Physicians PO Box 79013 Baltimore, MD 21279-0013

RM Coco PO Box 1270 Cape Girardeau, MO 63702-1270

Schettine & Nguyen 319 W. Franklin Street RE: St Mary's Richmond, VA 23220 Shell/Citi P. O. Box 6497 Sioux Falls, SD 57117-6497

Sterling Savings Bank 7777 Alvarado Rd. Suite 501 La Mesa, CA 91942

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